

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

Fill in Reporting Period dates: Beginning Date: Octob	ber 22, 2012 Ending Date: December 31, 2012				
Type of Report: (Check one) 8th day preceding preliminary 8th day preceding election	☐ 30 day after election				
Carol Doherty	Committee To Elect Carol Doherty				
Candidate Full Name (if applicable)	Committee Name				
School Committee	V. Pamela Crowell				
Office Sought and District	Name of Committee Treasurer				
148 Highland Street, Taunton, MA 02780	148 Highland Street, Taunton, MA 02780				
Residential Address	Committee Mailing Address				
Telephone Number (optional): (508) 822-5837	Telephone Number (optional):				
SUMMARY BALANC	CE INFORMATION:				
Line 1: Ending Balance from previous report	9.44				
Line 2: Total receipts this period (page 3, line 11)	986.79				
Line 3: Subtotal (line 1 plus line 2)	996.23				
Line 4: Total expenditures this period (page 5, line	ne 14) 986.79				
Line 5: Ending Balance (line 3 minus line 4)	9.44				
Line 6: Total in-kind contributions this period (page	age 6) 1,861.5				
Line 7: Total (all) outstanding liabilities (page 7)	0				
Line 8: Name of bank(s) used: Taunton Federal Cre	edit Union				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.					
Signed under the penalties of perjury: Cavol Dohaty (Candidate's signature) Date: Jan. 19, 2012					

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received		Tamount	(101 contributions of \$200 of inote)
11-10-2011	Carol Doherty 148 Highland Street	986.79	Candidate
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g vald efter hat kannen meles in der skallet in entweren in de en en en eine meles in eine en en			
Line 9: Total Rece	ipts over \$50 (or listed above)	986.79	
Line 10: Total Receipts \$50 and under* (not listed above)		90	
Line 11: TOTAL	RECEIPTS IN THE PERIOD	986.79	← Enter on page 1, line 2
Line 11: TOTAL	RECEIPTS IN THE PERIOD	986.79	Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Date Received Name and Residential Address (alphabetical listing required)		Occupation & Employer (for contributions of \$200 or more)	
Line 9: Total Recei	ipts over \$50 (or listed above)	0		
Line 10: Total Rece	ripts \$50 and under* (not listed above)	0		
Line 11: TOTAL I	RECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

срог сап схрен		report all expenditures. Please include your committee name and a page number on each page.)				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
11-02-2011	Election Mall	MyElectionMall.com	Robo-Calls	255		
11-08-2011	Off Broadway Diner	19 Taunton Green Taunton, MA 02780	Election Night Celebration	386.48		
11-01-2011	Liberty Printing	99 Lawrence Street Brockton, MA 02303	Door Cards	345.31		
	3					
				,		
		Line 12: Total Expenditures ov	ver \$50 (or listed above)	986.79		
			0 and under* (not listed above)	0		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	986.79		

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	A STATE OF THE STA	2	
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
	,	a .	7	
	7			
		Line 12: Expenditures over \$50	(or listed above)	0
		Line 12. Expanditures \$50 and	under* (not listed shave)	0
		Line 13: Expenditures \$50 and	under" (not fisted above)	0
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	0
If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Sept. 15, 2011	Carol Doherty	148 Highland Street Taunton, MA 02780	Loan Forgiveness	1,861.5
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				,
20		Line 15: In-Kind Contributions	over \$50 (or listed above)	1,861.5
		Line 16: In-Kind Contributions	\$50 & under (not listed above)	0
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND Co	ONTRIBUTIONS	1,861.5

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
		,		
<i>y</i>	Enter on page 1, line 7 →	DING LIABILITIES (ALL)	0	